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Docket Number (Optional)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

019941-000410US

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In re Application of Toyohiro Sawada et al. Filed April 12, 2001 Application Number 09/834,414 DRUG DELIVERY SYSTEM FOR AVERTING PHARMACOKINETIC DRUG INTERACTION AND METHOD THEREOF

100 m	Group Art Unit 1616	Examiner Konata M. George		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a				
reply in the above identified application.				
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate non-small-entity fee are as follows (check time period desired): One month (37 CFR 1.17(a)(1)) Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4))				
☐ One month (37 CFR	1.17(a)(1))		\$ 672 8	
☐ Two months (37 CFF	R 1.17(a)(2))		\$ %	
	FR 1.17(a)(3))		\$930 <i>60</i>	
Four months (37 CF	FR 1.17(a)(4))		\$	
☐ Five months (37 CF	R 1.17(a)(5))		\$	
or credit any overpayment, I have enclosed a duplicate I am the applicant/inventor. assignee of record of the Statement under 37 C attorney or agent of rec attorney or agent under Registration number if ac	ne fee is enclosed. orm PTO-2038 is attaleady been authorized account. by authorized to chart, to Deposit Account e copy of this sheet. The entire interest. Second. or 37 CFR 1.34(a). cting under 37 CFR 1.34(a).	ached. d to charge fees in this rge any fees which may be req Number 20-1430. ee 37 CFR 3.71 sed. (Form PTO/SB/96).		
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February 7, 2003	_	Joseph ho		
Date		Signat		
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OTE: Signatures of all the inventors or assignee	es of record of the entire ir	nterest or their representative(s) are req	uired. Submit multiple	

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comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any

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